## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

lication or Docket Number

|                         |  | CLAIMS AS   | (Column                                |                    | (Colur                                     | nn 2)                                 | SMALL EN           |  | OR                | SMALL I                     | 100                    |
|-------------------------|--|---|--|--------------------|--|---------------------------------------|--------------------|--|-------------------|-----------------------------|------------------------|
| TOTAL CLAIMS            |  |   | (Column                                |                    |  |                                       | RATE               | FEE  |                   | (T) medical addition (1) to | <b>☆FEE</b>            |
| FOR                     |  |   | NUMBER                                 | FILED              | NUMBI                                      | R EXTRA                               | BASIC FEE          |  | OR                | BASIC FEE                   | 1040                   |
| TOTAL CHARGEABLE CLAIMS |  |   | /8 minus 20=                           |                    | *  |                                       | X\$ 9=             | ·  | OR                | X\$18=                      | ē                      |
| INDEPENDENT CLAIMS      |  |   | 1                                      | inus 3 =           | • _  |                                       | X42=               |  | OR                | X84=                        |                        |
|                         |  | IDENT CLAIM P   |  |                    |  | T I                                   |                    |  |                   | 000                         | The state of           |
|                         |  |   |  |                    |  | olumn 2                               | +140=              |  | OR                | +280=                       | 40%                    |
| * If                    |  |   | less than zero, enter "0" in column 2. |                    |  |                                       | TOTAL              |  | OR                | TOTAL                       | 104e)                  |
|                         | C  |   | MENDED - PART I<br>(Column             |                    |  | (Column 3)                            | umn 3) SMALL ENTIT |  |                   | OTHER THAN SMALL ENTITY     |                        |
| NTA                     |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT                   |  | HIG<br>NUM<br>PREV | HEST<br>MBER<br>IOUSLY<br>D FOR            | PRESENT<br>EXTRA                      | RATE               | ADDI-<br>TIONAL<br>FEE                           |                   | RATE                        | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT               | Total:   | *   | Minus                                  | **                 |  | 2                                     | X\$ 9=             | *-   | OR                | X\$18=                      |                        |
| NEW YEAR                | Independent                                    |   | Minus                                  | ***                |  | =                                     | X42=               | 10.0   | OR                | X84=                        |                        |
| ₹<br>3                  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                    |  |                                       | +140=              | 1. 1. A  | OR                | +280=                       | 5, xr,                 |
|                         |  |   |  |                    | . *  |                                       | TOTAL              |  | OR                | TOTAL                       |                        |
|                         |  |   |  | (Cal               | .mn (1)                                    | (Column 3)                            | ADDIT. FEE         |  | 10                | ADDIT. FEE                  |                        |
| NT B                    |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT                   |  | HIG<br>NU<br>PRE\  | umn 2)<br>HEST<br>MBER<br>/IOUSLY<br>D FOR | PRESENT<br>EXTRA                      | RATE               | ADDI-<br>TIONAL<br>FEE                           |                   | RATE                        | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT B             | Total  | * 27 "  | Minus                                  | **                 |  | =                                     | X\$ 9=             |  | OR                | X\$18=                      |                        |
|                         | Independent                                    | *   | Minus                                  | ***                | 10.01                                      | =                                     | X42=               |  | $\mathbf{I}_{OR}$ | X84=                        |                        |
| L                       | FIRST PRES                                     | ENTATION OF M   | IULTIPLE DE                            | PENDE              | VT CLAIM                                   |                                       | +140=              |  | OR                | +280=                       |                        |
|                         |  |   |  |                    |  |                                       | TOTAL              |  | OR                | TOTAL<br>ADDIT. FEI         |                        |
|                         |  | (Oalumn 4)  |  | (Col               | umn 2)                                     | (Column 3)                            | ADDIT. FEE         |  |                   | יווסטוויו בי                |                        |
| NT C                    |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT                   |  | HIC<br>NU<br>PRE   | GHEST<br>IMBER<br>VIOUSLY<br>ID FOR        | PRESENT<br>EXTRA                      | RATE               | ADDI-<br>TIONAL<br>FEE                           |                   | RATE                        | ADDI-<br>TIONAL<br>FEE |
| ME                      | Total  | *   | Minus                                  | **                 |  | =                                     | X\$ 9=             |  | OR                | X\$18=                      |                        |
| AMENDMENT               | independent                                    |   | Minus                                  | ***                | - 1  | =                                     | X42=               |  | OR                | X84=                        | 8                      |
|                         | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                    |  | и 🗌                                   | 4                  | <del>                                     </del> | 1                 |                             |                        |
|                         | Mile activities                                | lump 1 is loss than   | th ntry in o                           | olumn 2, w         | rite "O" in o                              | column 3.                             | +140=<br>TOTAL     |  | OR                | TOTA                        | <u>.</u>               |
|                         | * If the "Highest N                            | lumn 1 is less than<br>lumber Previously<br>lumber Previously | Paid For IN T                          | HIS SPAC           | E is less th                               | nan 20, enter "20<br>han 3, enter "3" | ADDIT. FEE         | <u> </u>   | OR                | ADDIT. FE                   | E <b>L</b>             |
|                         | The "Highest Nu                                | lumber Previously<br>Imber Previously f                       | Paid For" (Tota                        | or Indepe          | ndent) is t                                | he highest numb                       | er found in the a  | ppropriate b                                     | ox in c           | column 1.                   |                        |